PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee sufficients. maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

22830

7590

10/15/2004

CARR & FERRELL LLP 2200 GENG ROAD PALO ALTO, CA 94303

01/19/2005 MGEBREM2 00000069 060600 10039862

15.00 DA

700.00 OP 285.00 OP



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Corner Voc	(Depositor's name)		
Susan Nee	(Signature)		
January 12, 2005	. (Date)		

		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLICATION NO.	FILING DATE		PA1815US	9111
10/039 862	10/20/2001	Ting-Lan Ji	PAISISUS	, ,,,,,

TITLE OF INVENTION: SIMULTANEOUS MULTI-MODE AND MULTI-BAND ULTRASONIC IMAGING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$685		\$300	\$985	01/18/2005	
EXAMINER		ART UNI	Г	CLASS-SUBCLASS]		
		3737		600-437000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED On 			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
	ss an assignee is identified to in 37 CFR 3.11. Completion	elow, no assignee of of this form is NOT	lata will ap a substitut	pear on the patent. If an assignment.		document has been filed for	
(A) NAME OF ASSIG	NEE .	(В) RESIDEN	ICE: (CITY and STATE OR CO	JUNIKI) .	•	
Zonare Medi	ical Systems, I	nc.		Mountain View,		· Do	
Please check the appropria	ate assignee category or categ	ories (will not be pr	inted on the	patent): 🔲 Individual 🖼	Corporation or other private	group entity Government	
4a. The following fee(s) at Advance Order - #	re enclosed: o small entity discount permit of Copies	tad)	☐ Payme	of Fee(s): k in the amount of the fee(s) is not by credit card. Form PTO-20 irector is hereby authorized by coount Number	38 is attached.	or credit any overpayment, to a copy of this form).	
	us (from status indicated abors SMALL ENTITY status. Se	37 CFR 1 27	🗅 ь. Арг	licant is no longer claiming SM	ALL ENTITY status. See 37	CFR 1.27(g)(2).	
The Director of the USPT NOTE: The Issue Fee and interest as shown by the r	O is requested to apply the Is Publication Fee (if required ecords of the United States P	sue Fee and Publica will not be accepte atent and Trademark	tion Fee (if d from any Office.	any) or to re-apply any previous other than the applicant; a r	usly paid issue fee to the apper	r the assignee or other party in	
	Sumf	1		Date			
Typed or printed name	Susan Yee		·		on No. 41,388		
This collection of informan application. Confident	ation is required by 37 CFR I	.311. The information of the control	on is requir	ed to obtain or retain a benefit be collection is estimated to take be upon the individual case. Any	by the public which is to file to the life includes to complete, include comments on the amount of	ding gathering, preparing, and time you require to complete	

an application. Confidentially is governed by the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete submitting the complete submitted in th

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Inder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/039,862 **TRANSMITTAL** Filing Date October 20, 2001 **FORM** First Named Inventor Ting-Lan Ji et al. Art Unit (to be used for all correspondence after initial filing) 3737 **Examiner Name** Francis J. Jaworski **Attorney Docket Number** 3 **PA1815US**

Total Number of Pages	in This Submission	3	7 Monto, Docker Hamber	PA1815US			1
ENCLOSURES (Check all that apply)							
Extension of Tin	ched ply al s/declaration(s) ne Request nment Request dosure Statement		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Ad Terminal Disclaimer Request for Refund CD, Number of CD(s)	dress S	o Technologopeal Co f Appeals Co Appeal No Proprietant status Let Other Encidentify be mation Pos	losure(s) (please low): stcard	
Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53		Total pa	ge number does not include po	stcard and check.		·	
	SIGNA	TURE (OF APPLICANT, ATTOR	NEY, OR AGEN	T		
Firm or Individual name	r & Ferrell I	LP	Cust. No. 228	30			
Signature	Suxan Les Reg. No. 41,388						
Date Janu	January 12, 2605						
	С	ERTIFIC	CATE OF TRANSMISSIC	N/MAILING	_		_
I hereby certify that this of sufficient postage as first the date shown below.	correspondence is b	eing facsi	imile transmitted to the USPTO Idressed to: Commissioner for P	or deposited with th	e United : 50, Alexa	States Postal Service with andria, VA 22313-1450 on	
Typed or printed name	Susan Yee						
Signature	Sup	n Le	2L		Date	January 12, 2005	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.